

ENTRY BLANK

PLEASE TYPE OR PRINT

Entered previous May Show

Ms.

yes

no

Mr. Artist

JOSEPH KORNAL

(Last Name Last)

Permanent
Address

428 PARK AVE. NEW

Street

City

44210

Tel. (216) 673-5045

Zip

Area Code

Temporary
Address

Street

City

Tel. ()

Zip

Area Code

Permanent address is in what county? _____

Born in Cuyahoga County Yes No

Collaborator

(If Any)

May Show entries are not accepted or not sold.

Artist will pick up at Museum.

Museum should dispose of.

Museum should ship to artist C.O.D. at this address.

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until June 15, 1975.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature

Joseph Kornal

ENTRY BLANKS

1

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Medium or Materials

Mild steel - buffed

Interior
piece only

Title

UP AND OVER

Price or NFS

Insurance Value
If NFS Only

Size

9000

71 x 81 x 41

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale

Total No. in Edition

Price
UnframedPrice
of Frames

DO NOT WRITE IN THIS SECTION

72

(4)

ACCEPTED

REJECTED

FEE PAID

BY

2

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Medium or Materials

RECEIVED

J. Miller

RECEIVED

Title

JUN 2 1970

Price Framed
or NFSInsurance Value
If NFS Only

Size

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale

Total No. in Edition

Price
UnframedPrice of
Frame

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED

RECEIVED

BY

3/19

TSAT

DO NOT DETACH

1975 MAY SHOW

The Cleveland Museum of Art
Cleveland, Ohio 44106

Dates for Pick-up of Objects

Museum Service Entrance
9:30 a.m. to 4:30 p.m., Monday through Saturday

Rejected Objects

April 14 through April 26

Accepted Objects

June 23 through June 28

It is understood that the Museum will have the right to dispose
for its own account any object not called for by the dates listed.

Please keep address within this box for window envelope.

Name	JOSEPH KONZAL	
Address	428 Park Avenue	
City & State	Kent, Ohio	Zip 44240

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your
notification of acceptance or rejection.

ACCEPTANCE OR REJECTION NOTICE

This is your only receipt to claim your object(s). This notification will be mailed to you following judging.

DO NOT DETACH

RECEIVED

1

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Medium or Materials

Mild steel - buffed

Title

UP AND OVER

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72

(4)

ACCEPTED

REJECTED

X

DO NOT DETACH

2

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Medium or Materials

Title

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED